

PUBLIC HEALTH DEPARTMENT[641]

Notice of Intended Action

Twenty-five interested persons, a governmental subdivision, an agency or association of 25 or more persons may demand an oral presentation hereon as provided in Iowa Code section 17A.4(1)“b.”

Notice is also given to the public that the Administrative Rules Review Committee may, on its own motion or on written request by any individual or group, review this proposed action under section 17A.8(6) at a regular or special meeting where the public or interested persons may be heard.

Pursuant to the authority of Iowa Code section 135.25, the Department of Public Health hereby gives Notice of Intended Action to amend Chapter 140, “Emergency Medical Services System Development Grants Fund,” Iowa Administrative Code.

The rules in Chapter 140 describe the process to apply for and receive the Department’s emergency medical services (EMS) system development grants. The proposed amendments eliminate a requirement that the funds be awarded competitively, which will remove barriers that local applicants currently experience and improve the accessibility to these grants. Appropriate audit protections are taken to ensure funds are expended in an appropriate manner. The Department consulted with the state Emergency Medical Services Advisory Council, which voted in favor of recommending these amendments to the Director of Public Health.

The changes to definitions within these amendments are intended to bring Chapter 140 into compliance with EMS regulatory definitions found in other existing Department rules.

Any interested person may make written comments or suggestions on the proposed amendments on or before April 9, 2013. Such written comments should be directed to Gerd Clabaugh, Bureau of EMS, Department of Public Health, 321 East 12th Street, Des Moines, Iowa 50319. E-mail may be sent to gerd.clabaugh@idph.iowa.gov.

After analysis and review of this rule making, no impact on jobs has been found.

These amendments are intended to implement Iowa Code section 135.25.

The following amendments are proposed.

ITEM 1. Rescind the definitions of “Applicant” and “Emergency medical care personnel” in rule **641—140.1(135)**.

ITEM 2. Amend the following definitions in rule **641—140.1(135)**:

“*Ambulance service*” means ~~any privately or publicly owned service program which utilizes ambulances in order to provide patient transportation and emergency medical services~~ ambulance service as defined in 641—132.1(147A).

“*CEHs*” means ~~continuing education hours which are based upon a minimum of 50 minutes of training per hour~~ CEH as defined in 641—131.1(147A).

“*Continuing education*” means ~~training approved by the department which is obtained by a certified emergency medical care provider to maintain, improve, or expand relevant skills and knowledge and to satisfy renewal of certification requirements~~ continuing education as defined in 641—131.1(147A).

“*EMS Emergency medical care provider*” means ~~an individual who has been trained to provide emergency and nonemergency medical care at the first responder, EMT-basic, EMT-intermediate, EMT-paramedic, paramedic specialist or other certification levels recognized by the department before 1984 and who has been issued a certificate by the department~~ emergency medical care provider as defined in 641—131.1(147A).

“*Nontransport service*” means ~~any privately or publicly owned rescue or first response service program which does not provide patient transportation (except when no ambulance is available or in a disaster situation) and utilizes only first response vehicles to provide emergency medical care at the scene of an emergency~~ nontransport service as defined in 641—132.1(147A).

~~“Service program” means any 24-hour emergency medical care ambulance service or nontransport service that has received authorization by the department~~ service program as defined in 641—131.1(147A).

ITEM 3. Amend rule 641—140.4(135) as follows:

641—140.4(135) County EMS system development grants. Grants for EMS system development proposals at the regional, county, and local level are available through a ~~competitive selection grant~~ process from the department to county boards of supervisors for equipment, training, and support of infrastructure needs as identified in the countywide EMS strategic plan and the department system standards. County boards of supervisors may not take any administrative fee from these funds to support their work under this rule. County recipients of funds may subcontract work under this agreement to a county EMS association. Funds for training will be used to train members of a service program that provides service on a regular basis to residents of the county being funded. Funds for equipment require a \$1 match of regional, county, or local funds for each \$1 of EMS system development grant funds.

140.4(1) Eligible costs. Costs which are eligible for EMS system development grant expenditures as defined in the request for proposal (RFP) include:

a. Training.

(1) Reimbursement for initial training tuition, fees and materials up to an amount that is the lowest fee charged by the training entity following successful completion of an EMS course. Practical and written examination fees may also be included.

(2) Payment of continuing education tuition, fees and materials. Education provided by an EMS service program for the general public is an allowable expense.

(3) Payment for EMS training aids.

b. Other equipment as defined by the RFP.

c. Infrastructure support.

(1) Development and enhancement of EMS systems.

(2) Office equipment and supplies necessary to coordinate a countywide EMS system.

(3) Personnel services for staffing to provide countywide continuous quality improvement and medical direction.

The title to any EMS equipment purchased with these funds shall not lie with the department, but shall be determined by the county ~~EMS association~~.

140.4(2) No change.